#### **Application Data Sheet**

## **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Title:: METHOD AND APPARATUS FOR SYSTEM

MANAGEMENT USING CODEBOOK

CORRELATION WITH SYMPTOM EXCLUSION

Attorney Docket Number:: 286532-126

Request for Early Publication?:: No

Request for Non Publication?:: No

Suggested Drawing Figure:: 4

Total Drawing Sheets: 5

Small Entity?:: Yes

#### **Applicant Information**

#### **Inventor 1**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Family Name:: Ohsie

City of Residence:: Baltimore

State or Province of Residence:: MD

Country of Residence:: US

Street of mailing address:: 6409 Western Run Drive

City of mailing address:: Baltimore

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 21215

**Inventor 2** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Salvatore

Family Name:: DeSimone

City of Residence:: Woodbury

State or Province of Residence:: CT

Country of Residence:: US

Street of mailing address:: 45 Sherman Heights

City of mailing address:: Woodbury

State or Province of mailing address:: CT

Country of mailing address:: US

Postal or Zip Code of mailing address:: 06798

**Inventor 3** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Portugal

Status:: Full Capacity

Given Name:: Nelson

Family Name:: Ferreira

City of Residence:: New Rochelle

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 197 Drake Avenue, Apt. 2E

City of mailing address:: New Rochelle

State or Province of mailing address:: NY

Country of mailing address:: US

Postal or Zip Code of mailing address:: 10805

**Inventor 4** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israel

Status:: Full Capacity

Given Name:: Eyal

Family Name:: Yardeni

City of Residence:: Ardsley

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 38 Eastern Drive

City of mailing address:: Ardsley

State or Province of mailing address:: NY

Country of mailing address:: US

Postal or Zip Code of mailing address:: 10502

**Correspondence Information** 

Correspondence Customer Number:: 23483

Telephone Number:: 617-526-6505

Fax Number:: 617-526-5000

E-Mail Address:: rajesh.vallabh@haledorr.com

Representative Information

Representative Customer Number:: 23483

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Application claiming benefit under 35 USC	Serial No. 60/459,072	March 31, 2003
	119(e)		

# **Assignment Information**

Assignee name:: System Management Arts, Inc.

Street of mailing address:: 44 South Broadway

City of mailing address:: White Plains

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 10601